2005 FOR PROFIT CORPORATION REINSTATEMENT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # P03000062186 FILED PORTO BLOCK CONSTRUCTION, INC. 05 HAY 27 PH 12: 55 DEUNETART OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 6371 SW 18TH STREET 6371 SW 18TH STREET MIAMI, FL 33155 MIAMI, FL 33155 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number 30 - 018 174 City & State Applied For Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PORTOBANCO, HUGO F Street Address (P.O. Box Number is Not Acceptable) **6371 SW 18TH STREET** MIAMI, FL 33155 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent eignature required when reinstating) DATE In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$300.00 corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete IIII F NAME PORTOBANCO, HUGO F NAME 6371 SW 18TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33155 CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

5/23/05

PORTO BLOCK CONSTRUCTION, INC 6371 S.W. 18TH STREET MIAMI, FLORIDA 33155 786/258-4992

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

REF: p03000062186 EIN # 30-0181727

To whom it may concern:

Please be advised that I am in receipt of your letter in regards to reinstatement of the corporation.

My records only indicate that I sent in March of 2004 \$ 150.00 with our annual report and never received any other correspondence. When in 2005 I went to submit the annual report I was informed that my corporation had been administratively dissolved. I never received any letter with a corrected report request; I would of sent it back immediately.

I would appreciate if you would waive the \$ 600.00 reinstatement fee as I never received the request for annual report correction. I am herewith enclosing an additional \$ 150.00 for 2005 along with \$ 300.00 requested originally.

Thank you for your consideration.

Sincerely,

Hugo Portobanco

President